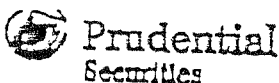


EXHIBIT F

02/28/2001 17:01 3123419536

RESOURCE TECHNOLOGY

PAGE 83



Prudential Securities Incorporated
One Seaport Plaza
New York, NY 10222

Partnership Account Agreement

Broker	Account No.	FA	Del ID
0115	29,712,555	815	81

Prudential Securities Incorporated is a subsidiary of The Prudential Insurance Company of America, Newark, New Jersey

We, the undersigned, request you to open a partnership account in the name of NASA LLC

a duly organized partnership, of which each of us is a general partner and of which the undersigned are the sole partners. We jointly and severally authorize and instruct you to accept from any one of us (each of us being fully authorized to act alone) any and all orders upon said account, and to act thereon, including (but not exclusively) any and all orders for the purchase, for cash and/or on margin, of securities, options and commodities, for the sale of securities, options and commodities, for the payment of money, including payments to the person giving the order or any other action with respect thereto.

You are hereby further authorized to deliver, from time to time, to any one of us, securities and/or commodities held to the credit of said account and to pay, from time to time, to any one of us, monies held by you to the credit of said account, and each of us likewise consents that confirmations and notices with reference to said account may be sent or given by you to any one of us. Any one of us, acting alone, is fully authorized to make any commitments, agreements and/or modifications thereof, and enter into any transactions of any kind, with respect to this account.

This agreement shall be governed by the laws of the State of New York.

The authority hereby conferred shall remain in force until written notice of its revocation, addressed to you, is delivered to your office at One Seaport Plaza, New York City, and receipt thereof is acknowledged to us in writing signed by an officer of your corporation.

Each of us will sign all agreements as are required in connection with transactions for said account, all of the terms and provisions of which agreement, in addition to the provisions hereof shall be binding upon the partnership and upon each of us.

Each of us understands that, under the Rules of Fair Practice of the National Association of Securities Dealers, securities in certain public offerings may not be sold to any of the following:

- (1) any officer, director, employee or agent of Prudential Securities Incorporated;
- (2) any officer, general partner, director, employee or agent of any other broker/dealer;
- (3) any senior officer of a bank, savings and loan company, insurance company, registered investment company, registered investment advisory company or any other institutional type domestic or foreign company engaged directly or indirectly in buying or selling securities;
- (4) any employee of one of the institutions in 3 (3) above who works in the securities department of that institution or whose activities directly or indirectly involve or may influence the function of buying or selling securities for that institution;
- (5) any person who may be in a position to act as a finder as to offerings or in a fiduciary capacity to entities who may be underwriters of offerings (such as, for example, attorneys, accountants, etc.); or
- (6) a member of the immediate family of any person noted in 3 (1) through (5) above. ("immediate family" for these purposes includes parents, mother-in-law or father-in-law, husband or wife, brother or sister, brother-in-law or sister-in-law, children, or any relative to whose support the person contributes directly or indirectly).

We represent to you that there (check one): ☐ is ☐ is not any party to this account who is a person described above.

Name (Please Print)

Name (Please Print)

Name (Please Print)

Name (Please Print)

Name (Please Print)

Signature

Signature

Signature

Signature

Signature

THIS DOCUMENT MUST BE EXECUTED IN CONJUNCTION WITH CASH OR MARGIN AGREEMENT



Part 1 White, New Accounts Copy
Part 2 Yellow, Research Copy

EXHIBIT

E

36 376 8780

Form **SS-4**

(Rev. December 1993)

Department of the Treasury
Internal Revenue Service**Application for Employer Identification Number**(For use by employers, corporations, partnerships, trusts, estates, churches,
government agencies, certain individuals, and others. See instructions.)

EIN

OMB No. 1545-0003

Expires 12-31-96

Please type or print clearly.

1 Name of applicant (Legal name) (See instructions.)
NOLA L.L.C.

2 Trade name of business, if different from name in line 1

3 Executor, trustee, "care of" name

4a Mailing address (street address) (room, apt., or suite no.)
401 S. LaSALLE STREET #1703

5a Business address, if different from address in lines 4a and 4b

4b City, state, and ZIP code
CHICAGO, IL 60605

5b City, state, and ZIP code

6 County and state where principal business is located
COOK - ILLINOIS

7 Name of principal officer, general partner, grantor, owner, or trustor - SSN required (See instructions.)
Nice Company, an Illinois corporation

8a Type of entity (Check only one box.) (See instructions.)

☐ Sole Proprietor (SSN) _____

☐ REMIC ☐ Personal service corp.

☐ State/local government ☐ National guard

☐ Other nonprofit organization (specify) _____ (enter GEN if applicable)

☐ Other (specify) _____

☐ Estate (SSN of decedent) _____

☐ Plan administrator-SSN _____

☐ Other corporation (specify) _____

☐ Federal government/military ☐ Church or church controlled organization

☒ Trust

☒ Partnership

☐ Farmers' cooperative

8b If a corporation, name the state or foreign country (if applicable) where incorporated State _____ Foreign country _____

9 Reason for applying (Check only one box.)

☒ Started new business (specify) _____

☐ Hired employees

☐ Created a pension plan (specify type) _____

☐ Banking purpose (specify) _____

☐ Changed type of organization (specify) _____

☐ Purchased going business

☐ Created a trust (specify) _____

☐ Other (specify) _____

10 Date business started or acquired (Mo., day, year) (See instructions.)
7/25/95

11 Enter closing month of accounting year. (See instructions.)
DECEMBER

12 First date wages or annuities were paid or will be paid (Mo., day, year). Note: If applicant is a withholding agent, enter date income will first be paid to nonresident alien. (Mo., day, year)

13 Enter highest number of employees expected in the next 12 months. Note: If the applicant does not expect to have any employees during the period, enter "0."

Nonagricultural 0 Agricultural 0 Household 0

14 Principal activity (See instructions.) Holding Company

15 Is the principal business activity manufacturing? ☐ Yes ☒ No

If "Yes," principal product and raw material used _____

16 To whom are most of the products or services sold? Please check the appropriate box. ☐ Business (wholesale) ☒ N/A

☐ Public (retail) ☐ Other (specify) _____

17a Has the applicant ever applied for an identification number for this or any other business? ☐ Yes ☒ No

Note: If "Yes," please complete lines 17b and 17c.

17b If you checked the "Yes" box in line 17a, give applicant's legal name and trade name, if different than name shown on prior application.

Legal name _____ Trade name _____

17c Enter approximate date, city, and state where the application was filed and the previous employer identification number if known.

Approximate date when filed (Mo., day, year) _____ City and state where filed _____ Previous EIN _____

Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, it is true, correct, and complete.

Name and title (Please type or print clearly.) H. GARY METZGER, President of Manager

Signature [Signature] Date 7/25/95

Note: Do not write below this line. For official use only.

Please leave blank _____ Geo. _____ Ind. _____ Class _____ Size _____ Reason for applying _____

Form SS-4 (Rev. 12-93)

For Paperwork Reduction Act Notice, see attached instructions.

H753

3W5012 2.000

RS 02835

Form **LLC-5.25**

January 1994

George H. Ryan
 Secretary of State
 Department of Business Services
 Limited Liability Company Division
 Room 357, Howlett Building
 Springfield, IL 62756

Payment may be made by business
 firm check payable to Secretary of State.
 (If check is returned for any reason this
 filing will be void.)

Illinois
Limited Liability Company Act
Articles of Amendment

Filing Fee \$100.

SUBMIT IN DUPLICATE

Must be typewritten

This space for use by Secretary of State

Date

Assigned File #

Filing Fee

Approved:

7-1095

0000-9245

\$100

R

This space for use by
Secretary of State**FILED**

JUL 10 1995

LIMITED LIABILITY CO. DIV.
 GEORGE H. RYAN
 SECRETARY OF STATE

1. Limited Liability Company name: NOLA L.L.C.
2. File number assigned by the Secretary of State: 00009245
3. Federal Employer Identification Number (F.E.I.N.): 36-3968780
4. These Articles of Amendment are effective on ☒ the file date or a later date being _____, not to exceed 30 days after the file date.
5. The Articles of Organization is amended as follows: (Attach a copy of the text of each amendment adopted.)
 (Address changes of P.O. Box and c/o are unacceptable)
 - ☐ a) Admission of a new member (give name and address below)
 - ☒ b) Admission of a new manager (give name and address below)
 - ☐ c) Withdrawal of a member (give name below)
 - ☒ d) Withdrawal of a manager (give name below)
 - ☐ e) Change in the address of the office at which the records required by Section 1-40 of the Act are kept (give new address, including county below)
 - ☐ f) Change of registered agent and/or registered agent's office (give new name and address, including county below)
 - ☐ g) Change in the limited liability company's name (list below)
 - ☐ h) Change in date of dissolution or other events of dissolution enumerated in item 8 of the Articles of Organization
 - ☐ i) Other (give information below)

Nice Company, an Illinois corporation, has withdrawn as manager of the LLC.
 Teletech Systems, Inc., an Illinois corporation, is admitted as the new
 manager of the LLC. Teletech Systems, Inc., address is 401 S. LaSalle, #1703,
 Chicago, Illinois. Its corporate file number is 5778-061-4.

60605

LLC-5.25

6. This amendment was adopted by the managers. S. 5-25(3) ☒ Yes ☐ No
a) The majority of the managers so approved. ☒ Yes ☐ No
b) Member action was not required. ☐ Yes ☒ No
7. This amendment was adopted by the members. S. 5-25(4) ☒ Yes ☐ No
a) At a meeting of the members, with the required number of affirmative votes necessary to adopt the amendment. ☒ Yes ☐ No
b) Only by written consent signed by the members having the required number of votes necessary to adopt the amendment. ☐ Yes ☒ No
8. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this articles of amendment is to the best of my knowledge and belief, true, correct and complete.

Dated May 15, 1995.

Nice Company

BY: Leon Greenblatt

Leon Greenblatt, President

Nice Company, resigning Manager
of the LLC

Teletech Systems, Inc.

By: H. Gary Metzger

(Signature)

H. Gary Metzger, President

(Type or print Name and Title)

Teletech Systems, Inc., Manager of the LLC

(If applicant is a company or other entity, state name of company
and indicate whether it is a member or manager of the LLC.)

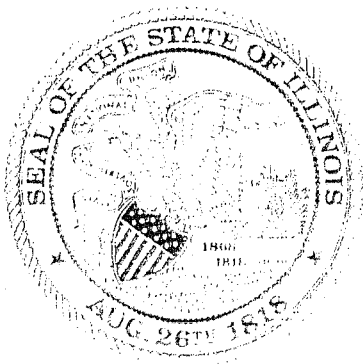
File Number 0000924-5



Whereas, ARTICLES OF ORGANIZATION OF
NOLA L.L.C.,
ORGANIZED UNDER THE LAWS OF THE STATE OF ILLINOIS HAVE BEEN FILED
IN THE OFFICE OF THE SECRETARY OF STATE AS PROVIDED BY THE LIMITED
LIABILITY COMPANY ACT OF ILLINOIS, IN FORCE JANUARY 1, 1994.

*Now Therefore, I, George H. Ryan, Secretary of State
of the State of Illinois, by virtue of the powers vested in me by
law, do hereby issue this certificate of organization under the
Illinois Limited Liability Company Act.*

*In Testimony Whereof, I hereto set my hand and cause to
be affixed the Great Seal of the State of Illinois, at
the City of Springfield, this 27TH
day of JULY A.D. 19 94 and
of the Independence of the United States
the two hundred and 19TH.*



George H. Ryan
SECRETARY OF STATE

Form **LLC-5.5**
January 1994

George H. Ryan
Secretary of State
Department of Business Services
Limited Liability Company Division
Room 357, Howlett Building
Springfield, IL 62756

Payment must be made by certified check, cashier's check, Illinois attorney's check, Illinois C.P.A.'s check or money order, payable to "Secretary of State."

Illinois
Limited Liability Company Act
Articles of Organization

Filing Fee \$500.
SUBMIT IN DUPLICATE
Must be typewritten

This space for use by Secretary of State

Date 07-27-1994
Assigned File # 0000-924-5
Filing Fee \$ 500.00
Approved: ZB

This space for use by
Secretary of State

FILED

JUL 27 1994

LIMITED LIABILITY CO. DIV.
GEORGE H. RYAN
SECRETARY OF STATE

1. Limited Liability Company Name: NOLA L.L.C.

(The LLC name must contain the words limited liability company or L.L.C. and cannot contain the terms corporation, corp., incorporated, inc., ltd., co., limited partnership, or L.P.)

2. Transacting business under an assumed name ☐ Yes ☒ No.

If YES, a Form LLC-1.20 is required to be completed and attached to these Articles.)

3. The address, including county, of its principal place of business. (Post office box alone and c/o are unacceptable.)

401 S. LaSalle Street #1703, Chicago, IL 60605 COOK COUNTY

4. Federal Employer Identification Number (F.E.I.N.): applied for

5. The Articles of Organization are effective on: (Check one)

a) ^{xx} the filing date, or b) another date later than but not more than 60 days subsequent to the filing date: _____
(month, day, year)

6. The registered agent's name and registered office address is:

Registered agent:	Mark	A.	Goldsher
	First Name	Middle Initial	Last name
Registered Office:	640 N. LaSalle Street	#300	
(P.O. Box alone and c/o are unacceptable)	Number	Street	Suite #
	Chicago	60610	Cook
	City	Zip Code	County

7. Purpose or purposes for which the LLC is organized: Include the business code # (Form 1065)
(If not sufficient space to cover this point, add one or more sheets of this size.)

The transaction of any or all lawful business for which limited liability companies may be organized under the Illinois Limited Liability Company Act.

Code: 7396

8. The latest date the company is to dissolve 6/30/2069
(month, day, year)

And other events of dissolution enumerated on an attachment.

LLC-5.5

9. Other provisions for the regulation of the internal affairs of the LLC per Section 5-5 (a) (8) included as attachment

☐ Yes ☒ No

10. a) Management is vested, in whole or in part, in managers ☒ Yes ☐ No
List their names and business addresses

Nice Company, an Illinois corporation
401 S. LaSalle #1703
Chicago, IL 60605

- b) Management is retained, in whole or in part, by the members ☐ Yes ☒ No
List their names and addresses

The limited liability company has two or more members in compliance with the provisions of the Illinois Limited Liability Company Act.

11. Name(s) & Address(es) of Organizer(s)

The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this articles of organization is to the best of my knowledge and belief, true, correct and complete.

Dated July 25 19 94

Signature and Name

1. H. Gary Metzger
Signature
H. Gary Metzger, President
(Type or print name and title)
Nice Company, an Illinois corporation
(Name if a corporation or other entity)
2. _____
Signature
(Type or print name and title)
(Name if a corporation or other entity)
3. _____
Signature
(Type or print name and title)
(Name if a corporation or other entity)

Business Address

1. 401 S. LaSalle #1703
Number Street
Chicago, IL 60605
City/Town
State Zip Code
2. _____
Number Street
City/Town
State Zip Code
3. _____
Number Street
City/Town
State Zip Code

(Signatures must be in ink on an original document. Carbon copy, photocopy or rubber stamp signatures may only be used on conformed copies.)

Form

LLC-5.25

Illinois

This space for use by
Secretary of State

January 1994

Limited Liability Company Act
Articles of Amendment

George H. Ryan
Secretary of State
Department of Business Services
Limited Liability Company Division
Room 357, Howlett Building
Springfield, IL 62756

Filing Fee \$100.

SUBMIT IN DUPLICATE

Must be typewritten

This space for use by Secretary of State

Payment may be made by business
firm check payable to Secretary of State.
(If check is returned for any reason this
filing will be void.)

Date 6-6-01
Assigned File # 0000-924-5
Filing Fee \$ 25.00
Approved: JB

FILED

JUN 6 2001

JESSE WHITE
SECRETARY OF STATE1. Limited Liability Company name: NOLA L.L.C.

LC0014113

2. File number assigned by the Secretary of State: 00009245

PAID

3. Federal Employer Identification Number (F.E.I.N.): 36-3968780

JUN 06 2001

4. These Articles of Amendment are effective on ☒ the file date or a later date being _____,
not to exceed 30 days after the file date.5. The Articles of Organization is amended as follows: (Attach a copy of the text of each amendment adopted.)
(Address changes of P.O. Box and c/o are unacceptable)

- ___ a) Admission of a new member (give name and address below)
- ___ b) Admission of a new manager (give name and address below)
- ___ c) Withdrawal of a member (give name below)
- ___ d) Withdrawal of a manager (give name below)
- ___ e) Change in the address of the office at which the records required by Section 1-40 of the Act are kept (give new address, including county below)
- ☒ f) Change of registered agent and/or registered agent's office (give new name and address, including county below)
- ___ g) Change in the limited liability company's name (list below)
- ___ h) Change in date of dissolution or other events of dissolution enumerated in item 8 of the Articles of Organization
- ___ i) Other (give information below)

New Registered Agent:

Leon A. Greenblatt
330 S. Wells Street, Suite 711, Chicago, IL 60606
COOK COUNTY

LLC 11

RS 2928

LLC-525

9245

6. This amendment was adopted by the managers. S. 5-25(3) ☒ Yes ☐ No
 a) The majority of the managers so approved. ☒ Yes ☐ No
 b) Member action was not required. ☒ Yes ☐ No
7. This amendment was adopted by the members. S. 5-25(4) ☒ Yes ☐ No
 a) At a meeting of the members, with the required number of affirmative votes necessary to adopt the amendment. ☒ Yes ☐ No
 b) Only by written consent signed by the members having the required number of votes necessary to adopt the amendment. ☐ Yes ☒ No
8. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this articles of amendment is to the best of my knowledge and belief, true, correct and complete.

Dated June 1, 2001, 19 .

BY:
 (Signature)

Leon A. Greenblatt, Secretary
 (Type or print Name and Title)

Teletech Systems, Inc., Manager of the LLC

(If applicant is a company or other entity, state name of company and indicate whether it is a member or manager of the LLC.)

L.L.C. File Number: 00009245

Filing Deadline is Prior to: 07/01/1997

This report must be RECEIVED in the office of the Secretary of State prior to the anniversary date to avoid late filing penalties and eventual administrative dissolution of its organization.

Form LLC-50.1(D)

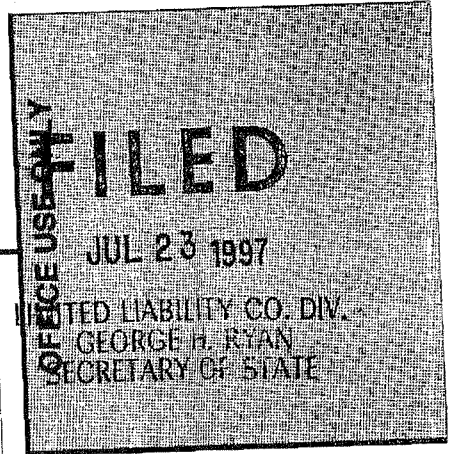
January 1994

George H. Ryan
Secretary of State - State of Illinois
Domestic Limited Liability Company
Annual Report

Filing Fee \$300

Submit in Duplicate

Must be typewritten



1. Limited Liability Company name: Registered Agent, Registered Office, City, IL., ZIP Code

NOLA L.L.C.
MARK A. GOLDSHER
OK 640 N LASALLE ST STE 300
CHICAGO IL, 60610-0000

2. CHANGES ONLY: REGISTERED AGENT

REGISTERED OFFICE

CITY, IL., ZIP CODE, COUNTY

3. Federal Employer Identification Number: 36-3968780

4. Address of the office at which the records required by Section 1-40 are to be kept is:

OK 330 SOUTH WELLS 711
Number Street Suite
CHICAGO, IL 60606 COOK
City, State ZIP Code County

5. Names and addresses of the managers or, if none, the members:

Name	Number & Street	City, State	ZIP Code	Select MGR/MBR
05778 0614 ANNUAL REPORT DUE 6-1-97 OK TELETECH SYSTEMS, INC.	330 S. WELLS #718	CHICAGO, IL	60606	Mgr

6. The undersigned affirms, under penalties of perjury, having authority to sign thereto, that this annual report is to the best of my knowledge and belief, true, correct and complete.

Payment may be made by business firm check payable to Secretary of State. (If check is returned for any reason this filing will be nullified)

Return to:

Department of Business Services
Limited Liability Company Division
Room 359, Howlett Building
Springfield, IL 62756

Dated

July 9, 1997
(Signature)

LEON GREENBLATT SECRETARY

TELETECH SYSTEMS IN MANAGER

(If applicant is a company or other entity, state name of company and indicate whether it is a member or manager of the LLC.)